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01 FC:1501 02 FC :1504	1400.00 OP 300.00 OP						(Date)	
03 FO: 800 PPLICATION NO.	FILING BARE OP	FIRST NAME		D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/660,099	10/660,099 09/11/2003		John Derek Guest		t	15568.15	6876	
TITLE OF INVENTION: T				•		T		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO		\$1400		\$300	\$1700	04/12/2006	
EXAMINER		ART UNIT		CL	ASS-SUBCLASS]		
HEWITT, JAMES M		3679			285-092000			
CFR 1.363). Change of correspond Address form PTO/SB/1. "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	(2) the na registered 2 registered listed, no HE PATEN as substitute	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. E PATENT (print or type) The will appear on the patent. If an assignee is identified below, the document has been filed for substitute for filing an assignment. RESIDENCE: (CITY and STATE OR COUNTRY)						
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Advance Order - # of		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).						
5. Change in Entity Status (from status indicated above) \[\begin{align*} \text{ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.} \end{align*} \] b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
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